

Election of a parent governor to the school governing body

School: _____

Please note if you are an existing parent governor and your term of office is coming to an end you will need to complete the nomination form if you wish to stand again.

Title: (Mr/Mrs/Miss/Ms etc.)	
Full name of nominee (block capitals)	
Address and postcode	
Parent of:	Class:
I have read the declaration of eligibility and confirm that I am eligible to be a school governor by signing and enclosing the completed Declaration of Eligibility form with this nomination form.	
In the event of a ballot being needed, please indicate if you wish your address to be shown on the ballot form. <input type="checkbox"/> Yes No <input type="checkbox"/> (tick as appropriate)	

If you wish, enter brief personal details of **not more than 80 words.** (See covering letter)

This form must be returned to the school by 10.00 am on Monday 15th January 2018